



AIR FREIGHT FORM

SHIPPER: (Full name, address, phone, email)	
CONSIGNEE: (Full name, address, phone, email)	
AIRPORT OF DESTINATION:	
REASON FOR SHIPPING THE GOODS:	
GOODS DESCRIPTION:	
NUMBER OF PACKAGES:	
DIMENSIONS OF PACKAGES: (Ex: 2 / 100x30x40 cm, 3 / 30x40x50 cm etc)	
TOTAL WEIGHT:	
PICK UP REQUIRED?	<input type="checkbox"/> YES <input type="checkbox"/> NO
PICK UP ADDRESS, WITH CONTACT DETAILS (if other than shipper's details)	
DATE OF PICK UP / DELIVERY TO OTP AIRPORT	

After fill in, please save the document in pdf format and send it by email to office@dgro.ro